

LINCOLN / LOGAN COUNTY ENTERPRISE ZONE



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PROJECT APPLICATION FOR ENTERPRISE ZONE BENEFITS

BUSINESS INFORMATION

Legal Business Name: _____
Street Address: _____
City/State/Zip: _____
Phone Number: _____

Business Contact Name: _____
Email Address: _____

FEIN (Federal Employer Identification Number): _____ UIN (Unemployment Insurance Number): _____

PROJECT INFORMATION

Project Name: _____
Street Address: _____
City/State/Zip: _____

Building Permit Issue Date: _____
Building Permit (Attached) Number: _____
FTE covered employees at project initiation: _____
Estimated project start date: _____
Estimated project completion date*: _____
Estimated building material cost*: _____
Estimated labor cost*: _____
Estimated FTE employees at project conclusion*: _____

*Within 60 days of the conclusion of the Project, the Owner must provide the actual project information related to the completion date, building materials, labor costs, and the number of full time equivalent employees per State Statute.